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Financial toxicity and cancer-related distress among melanoma survivors

Background: Melanoma survivors are at risk for significant financial burden due to cancer care and out of pocket costs. We explored 1) the financial impact of melanoma and its relationship to cancer-related distress, and 2) survivors' experiences discussing financial burden with their health care team.

Methods: Of 110 melanoma survivors enrolled in the Cancer Support Community's online Cancer Experience Registry, 56 completed questions about financial impact of cancer and cost of care communication. Participants rated concern (0=not at all; 4=very seriously) about 27 items encompassing psychological, emotional, physical and practical concerns; items were summed into a total distress score (mean=33, SD=21, range 0-88). Financial impact and overall distress were examined via regression analysis.

Results: Participants were 71% female, 89% Caucasian, median age 54, and median time since diagnosis 2.5 years. Total annual income: 34% <\$60K; 46% \$60K+; 20% not reported. 24% spent \$101-250/month on melanoma out of pocket costs; 20% spent \$251-500; and 24% spent ≥\$500. The top concern was health insurance/money worries (69% moderately to very seriously concerned). Due to medical costs, 57% depleted their savings, 20% borrowed against or used retirement money, 20% used pharmaceutical assistance programs, 13% skipped medicine dosages at least sometimes, and 17% postponed filling prescriptions. Only 28% reported that their health care team spoke to them about cost of care, and 28% were asked about financial distress; 42% desired financial assistance. Financial impact was associated with an increase in overall distress for those with income <\$60K (p<.05; interaction p<0.05).

Conclusions: Substantial proportions of melanoma survivors experience financial burden that can impact quality of life, particularly lower income individuals. Although oncologists are encouraged to discuss treatment costs, most patients report they have not had these discussions with providers. These results support the development/evaluation of interventions to enhance doctor-patient communication, and financial counseling to minimize financial burden of melanoma and the risks it can confer for quality of life, course of cancer care, and health outcomes.